

HERB AND LIFE: A CHINESE MEDICAL FAMILY

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This written thesis examines the process of producing *Herb and Life: a Chinese Medical Family*, a thirty-minute documentary video that explores the producer's family members' relationship with Traditional Chinese Medicine. This documentary uses interviews, narration, music, and observational sequences to display documentary subjects' career choices and their experiences with Traditional Chinese Medicine.

This written thesis reveals the development of this documentary, from the pre-production to production and post-production stages. It also incorporates theoretical analysis and self-evaluation of this documentary video.

## TABLE OF CONTENTS

Chapter	Page
1. PRE-PRODUCTION.....	1
Short Description	
Purpose and Intended Audience	
Feasibility	
Summary of Background Research	
Two Video Reviews	
Style and Approach	
2. PRODUCTION.....	17
Shooting Journal	
Rationales about Production	
Interview	
Crew and Equipment	
3. POST-PRODUCTION.....	33
Paper Edit and Rough Cut	
Second Cut	
Aesthetic Evaluation of Editing	
Equipment	
Translation	
4. THEORETICAL ANALYSIS.....	42
Personal Is Political?	
The Approach	
5. EVALUATION OF THE COMPLETED WORK.....	47
Pre-Production	
Production	
Post-Production	
APPENDICES.....	49
REFERENCE LIST.....	67

## CHAPTER 1

### PRE-PRODUCTION

#### Short Description

Whenever I get ill, my mother feeds me a kind of bitter, dark, and strong smelling medicine soup which is totally made up of natural herbs. I still remember when I was fed this soup the first time; I vomited almost all of it, for the taste and the smell seemed so terrible. However, as I was growing up I got used to this healing medicine which could help me become healthier, for we, the Chinese people, believe such herb soups have a magnificent effect to cure people...

Expanding upon this opening narration, this documentary explored two themes: one was the biography of my own family; the other covered some basic knowledge about traditional Chinese medicine. All my family members, except myself, learned Chinese medicine and have been involved in medical fields. My father and my mother went to the same Chinese medical school in Gui Yang City, Gui Zhou Province. They met there and got married. After several decades, my older brother went to the same university and also pursued a medical career. In this documentary, I asked why they had chosen to devote their careers to Chinese medicine, how they dealt with their vocation as doctors, and how they incorporated this philosophy into their own lives. This family biography was interwoven with basic information about Chinese medicine.

The history of Chinese medicine can be traced back over 5000 years. After thousands of years of testing and experiments, the traditional Chinese medical field has collected a large number of natural herbs which can be used as medicine and dietary supplements. Chinese medicine also has developed comprehensive theories and methodologies such as acupuncture, tuina and so on. Nevertheless, in the past 200 years, traditional Chinese medicine has been influenced by Western medicine. Many

Chinese people do not trust the traditional ways anymore. Recently, Chinese medicine practitioners are working to combine traditional approaches with Western medicine so that they can provide better treatments to cure patients. My own parents were trained in, and practice, both traditional Chinese medicine and Western medicine. Today, younger generations seem to have an increased interest in Chinese medicine.

This documentary attempted to combine my own family story with basic information about Chinese medicine. It was 30 minutes in length, color and shot in digital-8 videotape and edited in a digital format with Final Cut Pro® non-linear editing software (Apple Computer, Inc. [www.apple.com](http://www.apple.com)). Interviews, graphics, photos, and scenes formed the visual parts of this documentary. Narration, synchronous sound, and interviews (including voice over) made up of the audio part of this documentary. This video documentary was worth doing because it would bring an interesting Eastern perspective to the Western world of medicine.

#### Purpose and Intended Audience

This documentary project had two primary purposes. The first was academic in intent. Through this project, I would demonstrate the knowledge learned during my two year of study in the department of Radio, Television, and Film in the University of North Texas, especially from such classes as Documentary Pre-production, Documentary Production and Post-production, Contemporary Documentary and even Law and Regulation of Mass Media. This documentary was also my thesis project which I hoped it helpful for my future career.

The other purpose was to provide an opportunity to share some information about Chinese medicine and the experiences of my family members with medical

professionals and others who are interested in this field. By examining my family members' devotion, ambition, excitement, and occasional frustration with Chinese medicine, this documentary gave valuable information to those who are preparing to pursue such a vocation. It also provided a useful audio and visual archive for Western medicine, especially for those Western medical professionals and students who are interested in a brief introduction to Chinese medicine. This documentary explored some interesting comparisons and contrasts between Western medicine and Chinese medicine.

The intended audiences were medical students, professionals, educators who intend to use this video for educational or research uses, and even cultural scholars who are curious about Chinese history and culture. Chinese approaches incorporate not only medical knowledge but also traditional Chinese philosophy and culture.

#### Feasibility

I obtained agreement and full support from my family concerning the production of this documentary. My mother, who is an expert in both Chinese medicine and Western medicine, started to help me collect archival material such as graphics, photos, and so on. She also gave me much guidance concerning these two medical approaches and would continue to advise me in this area.

Also, I am very familiar with the subject matter: one is my family; the other is Chinese medicine. My family members are intimate enough with me to be willing to talk on camera. Moreover, since I was in kindergarten, I have visited the hospital where my parents work. My mother has a habit of explaining her treatment procedures. When she cures patients who have unique and strange diseases, she explains to us how she at

last found the way to cure. During the school breaks, I often helped my mother in her clinic. In such an atmosphere, I was edified and learned some of the basic approaches and applications of Chinese medicine. This personal background helped me prepare this documentary.

### Summary of Background Research

After I had decided on the topic of my project, I researched books in libraries and communicated with my parents on the telephone. I was surprised to find some books related to Chinese medicine in the University of North Texas. For example, I found the English version of *The Yellow Emperor's Classic of Internal Medicine* (Ni, Maoshing, translator. 1995), which is one of the most famous Chinese medical classics written by the ancient Chinese. I talked with my mother through many international calls and received valuable information that allowed me to map my documentary quite clearly before the production. The following is the summary of this background research.

### **My Family**

My family is made up of four members: my father, Yongshun Yang; my mother, Yinghua Ma; my older brother, Hongyuan Yang; and myself, Hongyi Yang. In 1964, my father left his small hometown in Gui Zhou province in the southwest of China. He went to the capital city of this province, Gui Yang city and enrolled in the Traditional Chinese Medicine Department of Gui Zhou Medical College. The next year, he transferred to Gui Zhou, Gui Yang Traditional Chinese Medical College which had been established that same year. My mother enrolled in this same medical college in 1965.

At least three events influenced my mother to choose Chinese medicine as her career. The first was that her grandmother trusted traditional Chinese Medicine, instead of Western medicine. She helped to raise my mother when she was young. Whenever my mother got ill, she treated her with some peculiar prescription from traditional Chinese Medicine. In my mother's childhood memories, traditional Chinese Medicine had good and positive results. In her high school class, there were two daughters of the most famous Chinese medical doctors in that city. These two doctors' marvelous abilities to save people's life made a very deep impression on my mother. She envied such healing power. Also during the same period, my grandmother got cirrhosis of the liver. She went to see many Western medical doctors, but everyone said that her disease was in the final stage and she would die very soon. My grandmother gave up on Western medicine. She sought help from Chinese medical practitioners. After four years of treatment, she was totally healed. My mother was shocked and understood that Chinese medicine could do something that Western medicine could not do. This also made her realize the disadvantages and advantages of both medical sciences, unlike some people who looked up to Western medicine but looked down upon Chinese medicine.

My father grew up in a poor rural town. Since he was a boy, he saw many poor people die because of lack of medicine and doctors. He felt mercy on them. His initial dream was to become a politician who would have the power to protect those poor people. However, his older brother died at 16 years of age because of tuberculosis. In fact, he once had seven brothers but all of them died of diseases. He is the only one who survived. He finally decided to become a doctor. At that time, only Chinese medicine



served the poor and isolated districts. My father saw Chinese medicine help and save many diseased rural people. Therefore, he decided to become a Chinese medical doctor who would have the capability of saving others.

After graduation from medical school, my parents were assigned by the school to work in a rural area called Xin Yi. My father at first worked in a town near where my mother worked. After they got married, my father moved to my mother's town. In 1972, my brother was born. After several years, I was born. Because my parents were so busy with their medical practices, they put me in day care. I still remember my hatred of this, exemplified by one particular event. One female teacher punished me by having me stand in a heavy rain for several hours. After this, my mother took me back home and I did not go to day care any more. When my mother recalled this, she said that putting me in day care was one of the most regrettable things in her life. They are loving parents, but they are also dedicated doctors. No matter how dirty, ugly and poor the patients are, they always try their best to save them. I still remember the knocks would sound often in the midnight when I was a child, for there were no telephones at that time. The knocks were for emergencies. No matter how early or late, my parents always got up and hurried immediately to be at the patient's bed. Sometimes, I was jealous of their attention and tender cares given to patients.

Nevertheless, I learned a lot from them, although I did not become a doctor. I learned how to have mercy on people, how to sympathize with their pain, and how to care for people. I could see that my parents treated patients not only with their minds but also their heart. I also learned how to treat people equally, for this was my parents' approach. Many patients become my parents' life-long friends.

Certainly, there were frustrations. Some patients or patients' relatives could not understand a doctor's role. No matter what procedures and medicine the doctor administered, the family blamed the doctor for the patient's death. At those times, my mother would sigh to herself, "I could eliminate diseases, but I could not give life. The life is not in my hand". As they encountered so much death, they often felt powerless and weak when they fought with death. "Some patients you thought would absolutely die, but they survived. Some patients you thought certainly would survive, but they died."

At that time, my parents believed that when people died, their souls also died. This meant that a person just disappeared after s/he died. They were caught by the hopeless and emptiness of life, for nothing was left when a person died. Therefore, they tried all ways to save patients, but they witnessed their failure. This made them very frustrated.

In 1991, my brother also went to the same medical school where my parents had attended. However, I believe this decision was not his, but my parents. They were eager to have him inherit their vocation. My brother obviously does not like medical science. He likes computer science and eventually found a job which combines his interest in computers and his medical knowledge. He now works as a lab director in an AIDS research center.

I have always feared pain, weakness, and death, so I did not want to become a doctor of either Western medicine or Chinese medicine. After I graduated from high school, I went to study film and television at Beijing Normal University.

In 1996, my mother retired from the hospital where she worked. The reason was not because she was too old to work, but because she wanted to try being an

independent practitioner, which was a new phenomenon in China at that time. She established her own clinic with my father's help. In 2001, she closed the clinic, for she came to visit me in the United States of America. In January 2002, she went back to China. Now she stays at home to rest, for her body also gets tired after the decades' tedious work. However, when patients find her, she still diagnoses them. My father is still working in a medical institute.

This documentary introduced the viewers to the basics of traditional Chinese medicine. Since most foreign and many Chinese viewers do not know much about traditional Chinese medicine, I explained some basic information in this documentary. Definitions of some basic theories and terms in traditional Chinese medicine are listed below.

Traditional Chinese medicine has a long history, and originated in ancient China. It is based on a set of theories such as Yin and Yang, the Five Elements, and Zang Fu. Traditional Chinese medicine came to be through ancient Chinese observation of nature and the effects that medical practices have on the human body.

### **History**

The earliest practice of Chinese medicine started at the moment that the ancient Chinese people ate herbs to cure their ailments. However, the first classic book of Chinese medicine, *Huang Di Nei Jing (Yellow Emperor's Classic of Internal Medicine)* was written in about 200 BC. It explained several Chinese medical theories, including acupuncture, herbs, and diet. Another book, *Shang Han Lun (Treatise on Diseases Caused by Cold Factors, Zhongjing Zhang)*, which appeared during the Han dynasty (206 BC- 220 AD), is still a valuable resource in Chinese medicine to the present day. During the Ming dynasty (1368-1644 AD), Shizheng Li wrote one of the greatest

herbological works, *Ben Cao Gang Mu (Materia Medica)*. Shizheng Li introduced thousands of various medical materials including animals, herbs, and minerals in this book.

### **Basic Terms**

#### **1. Yang and Yin**

In Chinese language, Yang originally means ‘ the bright side of a mountain’, but it also has additional meanings, including above, light, warm, and positive. Yin is the antonymous word of Yang. It means ‘ the dark side of a mountain’ and also means below, dark, cold, and passive. In Chinese medicine, Yang refers to superficial, dry, motion, and exterior of the body. Yin refers to deep, wet, stillness, and the interior of the body.

#### **2. The Five Elements**

In Chinese medicine, there are Five Elements: metal, wood, water, fire, and earth. Every element is associated with a sense organ in the human body. For example, the heart is associated with fire, liver with wood, kidney with water, spleen with earth. However, the heart, liver, kidney, and spleen here are not the actual organs in Western thinking. They are sense organs. For example, the heart in Chinese medicine includes the whole system which produces emotions and minds. These functions of the “heart” are almost like those of the brain in Western thinking.

The Five Elements theory actually emerged from the observation of nature. For example, the earth produces myriads of things. The “spleen” is like earth in one’s human body to feed the whole body. The “spleen” in Chinese medicine means the whole digestive system. The inter-relationships of the Five Elements determine the

operation of a human body. When there are problems with the balance of the Five Elements, a human body will have problems too.

### **Diagnosis**

In Chinese medicine, a doctor tries to tell the interior pathological changes from a patient's exterior characteristics. There are Four Examinations (Si Zheng) used to check a patient's health: smelling, questioning, and pulse taking. Looking is to observe a patient's complexion, eyes, tongues, hair, and so on. Smelling checks the smell of a patient, such as the smell of the mouth and of the excretions.

Questioning examination helps a doctor understand a patient's health history, family health history, sufferings from ailments, and so on. Pulse taking is a very important examination in diagnosis. There are total twenty-eight kinds of pulse qualities.

Different pulse qualities tell different ailments.

### **Acupuncture**

Acupuncture (Zhen Jiu in Chinese language) is a kind of treatment in Chinese medicine. An acupuncture doctor inserts different kinds of needles into particular points on a patient's body. Those points are called acupoints which are located and joined in Qi channels of the body. Through inserting needles into the body, an acupuncture practitioner can change or clean up the Qi channels in the body and thereby cure patients. Jiu (moxibustion) is a treatment in which a doctor put burning herbs on the acupoints of the skin. There are usually a layer of other herbs between the burning herbs and the skin. This treatment also helps to balance the Qi and Blood channels in the body, not through needles but through the warmth and the medical effects of the burning herbs.

## **Herbology**

Herbology plays an important role in Chinese medicine. Herbal medicine includes various parts of plants, minerals, and some particular animals. After diagnosis, a Chinese medical practitioner makes up a prescription which includes various kinds and amounts of herbs. These herbs usually are mixed and cooked in a soup which a patient will drink. In many cases, a prescription has more than four herbs. Few herbs are used alone. The inter-relationships between these herbs in a prescription strengthen the effect of the formula and simultaneously reduce the side effects of some herbs in the formula. In a formula, different herbs play different roles. Generally speaking, there are four categories of roles for herbs in the formula. King herbs have the strongest effect on the most serious illnesses. Minister herbs have effect on the main and the secondary illnesses, but their effects are less than king herbs. Assistant herbs can strengthen the effect of the king herbs, or reduce the toxic effects of the king and minister herbs. Messenger herbs magnify the effects of other herbs through communicating the actions of other herbs with the body.

### **Two Video Reviews**

During the research process, two videos made a deep impression on me. One was *Mystery of Chi* (David Grubin, 1993); the other was *Secret Daughter* (June Cross, 1997). In *Mystery of Chi*, Bill Moyers went to China with a film crew to explore the mystical Chinese medicine. He interviewed an American doctor who stayed in China to study Chinese medicine and culture for a long time. This video was the most comprehensive and detailed work among those I saw which introduces Chinese

medicine and culture to Westerners. In the beginning of this video, Bill Moyers showed his doubts concerning Chinese medicine. After the trip in China and the conversations with the doctor, he still was not persuaded completely, but he changed many previous misconceptions about Chinese medicine and learned much new information that he did not know before. It was personally interesting for me to watch a program about another culture looking at Chinese culture. This was like a double-reflection, which allowed me to know about how American culture looked at Chinese medicine and culture. Even though this was only one presentation of attitudes toward Chinese medicine and culture, I think it was a quite honest one. This video helped me to understand more about foreign viewers. As a Chinese citizen, I was making a video about Chinese medicine for foreign, primarily Western audiences.

*Secret Daughter* influenced me on the formal presenting aspect. This Public Broadcast Service documentary lasts about two hours. It describes a story of the producer, June Cross who was a “secret daughter” of a white woman and a black man. She did not tell her story in a straightforward way, but relates her personal story with the historical and cultural background in the society at that time; thereby, it prompts viewers’ thoughts about American racial history. I think this approach is quite risky but also inspiring. I considered producing my own documentary using this approach. However, I know the differences between *Secret Daughter* and mine. *Secret Daughter* is over two hours in length, which allows her to explore her own story and the historical part in adequate time. My documentary is only thirty minutes long. I cannot explore my theme as adequately in such a short period of time. Moreover, Chinese medicine history is a very complicated subject to explain to foreign audiences. My audiences and

subjects are different from *Secret Daughter* which treats a familiar history for the native audiences.

### Style and Approach

I wanted to distinguish this documentary from other ordinary introduction videos about Chinese medicine. In other words, this was not only a brief introduction video which explained one cultural practice to another culture, but it was also a biographic video. This meant that I developed a biographic plot which focused on my family members' experiences, dreams, and struggles as Chinese medical practitioners. Since the viewers would be foreigners who might be interested in Chinese medicine but might know little about it, I also included a brief introduction on Chinese medicine. In fact, the average Chinese person also does not know much about Chinese medicine. My mother explained some basic information about Chinese medicine. In her interview, I inserted images to assist her explanation. Interviews, photos, and observational segments formed the biographical part. When I edited the two parts together, I tried to find the bond between the spirit of Chinese medicine and my family members' lives. How did it influence my family? How did it relate to their experience? When I shot images, I tried to have more camera places, angles and movements. I like diffused lighting; therefore most of this documentary included diffused and low contrast lighting.

I was not excluded from this documentary. It was to some extent self-reflexive. I was the maker as well as one of the characters, but only a small part. I was the one who traced my family members' past and inner feelings. I was an insider as well as an outsider. When I interviewed them, my voice was heard sometimes. The interview



would be like informal conversation, instead of a formal presentation since the interviewees were intimate to me. It was not feasible to be formal with them. However, I still hoped to have conversations with them in a quiet place where we would not be interrupted. My narration went through the whole documentary. I added my comments on the narration, which meant my point of view was emphasized. Therefore, this was quite a subjective and personal style, not an “objective” one.

Since film was too expensive for me to shoot and process for this project, I used videotapes. Moreover, I like the feeling of shooting without being worried about using up the film is quickly. Videotapes allowed me to get more footage within my limited budget.

I chose my narration as my participation in this documentary, because I decided not to appear on camera and did not want to attract viewers’ attention to myself. I am not good on camera and I am a quite private person who hesitates to show myself publicly. I wanted to be an observer who hides behind the camera, and spoke out with my camera and editing. Therefore, I thought that my voice was a good channel to express my views directly. Since this documentary was about my own family, I did not want to be a totally detached observer. My narration could keep me from appearing too detached and also from appearing overly involved.

My documentary incorporates cinema verite elements, if cinema verite is defined based on Brian Winston’s remarks. He says, “Cinema verite is a style of documentary that deliberately draws attention to the processes involved in the making of the film.”

<sup>1</sup>In this documentary, as I mentioned above, my narration reveals my participation in the shooting process. In one of the narration, I said, “I am curious about my family members’ choice to practice traditional Chinese medicine. In the summer of 2002, I went from the United States back to my hometown, Gui Yang City, a hill city in southwestern China in order to explore my family’s history associated with Chinese medicine.” This lets viewers notice the shooting process intentionally. Moreover, the viewers can also hear my questions and remarks during most of the interviews and observational sequences. (For example, the sequence of my mother introducing herbs, the sequence of acupunctures, my mother’s interviews, and so on) This also makes viewers pay attention to the processes of making of the documentary. Looking through the two points, this documentary is close to cinema verite style. However, it is not exclusively pure cinema verite style.

There is at least one sequence in this documentary which displays direct cinema style. This sequence is about my mother’s diagnosing a patient. In this sequence, I am silent and tried to hide myself beside the camera. I do not speak one word during the shooting process and am a calm observer who also tried to eliminate any elements which would reveal the process of making the documentary, just like the sequences in Fred Wiseman’s *Hospital* (1969). As Erik Barnouw points out, “The direct cinema artist aspired to invisibility: the Rouch cinema verite artist was often an avowed participant. The direct cinema artist played the role of uninvolved bystander; the cinema

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<sup>1</sup> Winston, Brian. “Direct Cinema: The Third Decade.” Rosenthal, Alan, Ed. *New Challenges of Documentary*. Berkeley: University of California Press, 1988. 517.

verite artist espoused that of provocateur.”<sup>2</sup> In looking at the whole documentary, the cinema verite elements are more than direct cinema elements. However, my choice of cinema verite is not from consciousness. (I will analyze this point later in the theoretical chapter).

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<sup>2</sup> Barnouw, Erik. *Documentary: A History of the Non-fiction Film*. New York: Oxford University Press, 1983. 254-55.

## CHAPTER 2

### PRODUCTION

On June 5<sup>th</sup>, I took off for China from the Dallas/Fort worth Airport. I was excited but a little concerned, since I could not expect what I would face in the near future. Would I get adequate footage in China? What problems would I meet after I started shooting? Answers to all of these were unknown to me. After the long and tedious flight, I arrived at Beijing Capital airport, where I would eventually leave for Gui Yang City, my destination. I did not go to Gui Yang city immediately upon my arrival in China. I stayed in Beijing for a few days, for I wanted to shoot my previous school, Beijing Normal University, which would appear in my documentary, and to visit with my teachers and classmates.

I had been away from Beijing for two years. This city had changed dramatically. There are more buildings, more highways, more people and also more pollution now. Many of my classmates work in TV stations and universities. They have jobs and families, but they told me that they were still searching for the meaning of life. I found that Chinese society had become more commercialized and materialistic. Many people are cruel and apathetic. I could not help missing the courtesy and gentleness in Texas.

On an early morning, I went to the campus of Beijing Normal University. It had not changed too much, except for the addition of several new buildings. When I saw those new and young faces, memories rushed to my head at once. Every place stamped a story in my memory. I wanted to shoot many places, but I reminded myself that this was not a

story about me. So I constrained myself and shot only several representative scenes of the University campus.

Several days later, I took a flight to Gui Yang City. In only two years, my parents looked older than before, especially my father. I had not seen him for two years. My mother visited me in U.S.A last year. At that moment, I was sad and happy. I did not start shooting immediately. After the long journey, I had pain in my back. My mother also had a heart problem and I was eager to simply spend time with her. On June 14<sup>th</sup>, my birthday, I started videotaping my family for the first time. On the same day, I began to record the following shooting journal.

### Shooting Journal

June 14<sup>th</sup>, 2002

Today, I started shooting. Since I did not get the chance to interview my parents, I shot some old photos of them. My father was working and my mother was ill. However, my mother found some old photos and books for me. When she was looking for these photos, she seemed to be very excited to relate some stories to me, so I also shot a segment of these. When I reviewed the footage, I found the white balance was not good. My mother wore white clothes and my camera did not have a manual white balance function, so the image appeared blue.

June 15<sup>th</sup>

I interviewed my older brother and my father today. The interview of my older brother was a failure. He was quite nervous and I did not choose a suitable background. The picture looked uncomfortable. I have to do it again in the future.

It rained in the afternoon when I interviewed my father. He felt bored and almost fell into sleep. I did not know why, maybe because I did not allow him to smoke. He answered some questions and had some good points, but I still think it was not as good as I had expected. I still needed to talk with him later. My father usually has difficulty in communicating with me. I am not as intimate with him as with my mother. I feel hard to let him speak out his true thoughts. He is not like my mother who finds it easy to confide in me. However, with the process of shooting, I think that the situation maybe will become better.

June 16<sup>th</sup>

Mother was really a good character before the camera. She was relaxed but a little talkative. This was the first time that I interviewed her. She was better than I expected. We talked about why she had chosen to become a Chinese medical doctor, what were the difficulties that she had when she went to the medical school, and how she overcame these difficulties. It was very interesting that her difficulty in studying Chinese medicine was similar with the question that Dr. Steve Craig, one of my thesis committee members, put forward in the proposal meeting.

Dr. Craig asked if Chinese medicine could work maybe because of people's faith in it, since it could not be proved by modern science. My mother also faced this question when she went to the medical school. As a young person, she was very doubtful about the effects of those herbs, because Chinese medicine does not have real scientific theories. It was formed from all the experiences of ancient Chinese people. She could not accept it at first. However, when she really started to practice it, she found that it worked and it worked even without faith. To her, this proved that Chinese medicine had effective results. I got some good points from this interview which also stimulated my interest in Chinese medicine. I could see that my mom really loved and was excited

about Chinese medicine. But I was not satisfied with the lighting. It appeared a little red. It was a pity. I need to change the interview place in the next time.

June 17<sup>th</sup>-22<sup>nd</sup>

Translation and weekend.

June 23<sup>rd</sup>

I did not expect that an old patient who was cured by my mother in 1990 would visit her today. He had serious cirrhosis when he met my mom. He was 60 years old at that time. He had been drinking a lot since he was 15 years old. After several decades of damage caused by alcohol, his liver was destroyed. However, he was totally recovered after three years of Chinese medicine treatment by my mother. When he was examined again this year, nobody found any more liver problems. My mother recommended Chinese medicine treatment to him because Western medicine had no way to cure him and my mother had already explored a way to cure such disease by Chinese medicine. During these twelve years, he always comes to visit my mother once every several months in order to express his appreciation and also report his body condition to my mother. He became a friend of our family.

I thought this was a good chance, so I interviewed him and shot mom diagnosing him. He has felt a little uncomfortable recently. Mother said that it was because he was getting older and had some old-age hackneyed diseases, so mom gave him a prescription, attempting to keep his body healthy. I was very happy to have this chance, but it was a pity that I found the lighting not good again when I reviewed the footage. The images were redder than normal, just like the last time. I wondered why it happened again. Today, I found the reason. Because the white balance of my camera is automatic, it could not adjust to the lighting in that room, even though I tried my best to

arrange the lighting. Moreover, all the windows in our home are green and it was noisy if I opened the windows, so I could not use the natural sunlight. But when I used the lights in the room, it appeared red since the white balance could not match the lighting in the room. However, I found a good place where the lighting seemed better. I will try this place the next time. It was by the window of the study room where I could use a lamp and half of sunlight with the window curtain falls, the object looked better than in other places. I have changed four interview places since the beginning of shooting. I hope that this one can be good.

June 24<sup>th</sup>

I heard that the associate hospital of the Traditional Chinese Medical College would not allow me to shoot there, but father said that he would figure out a way to get permission. In fact, this hospital is not very important to my documentary, since it is only a place where my parents took their internships. I only wanted to get some images of herbs there. If I can shoot herbs in other places, I do not need to visit there. So I shot some old photos at home today.

June 25<sup>th</sup>

I was waiting for the shooting permission and took a rest at home.

June 26<sup>th</sup>

My shooting went on very well today. We went to the Traditional Chinese Medical College where my father, mother and brother studied before. I just wanted to try to shoot there since the associate hospital of this school did not permit my shooting, but I guessed that it still might be possible to shoot in the school. As I expected, we finished the whole process very smoothly and got much unexpected help from teachers and



faculty members there. When we arrived near the Student Association Office, a man came to greet my brother. He was one of his teachers. When he knew that my parents are alumni of this school and came to visit this school, he showed us around.

I let my parents and brother introduce the buildings where they studied and lived, and reflect their past in this school. I would insert some images into their interviews. When we talked with the faculty there, they told us that there were many precious specimens in the department of herbology. I will see if I can go there to shoot in the future.

June 27<sup>th</sup>

Today, I wrote shooting journal, organized footage, and planed future shooting. The shooting had already gone on for a period; I think this was the good time to consider the next step of production. I reviewed and categorized the footage; then, made the supplement shot list to be filmed in the near future.

June 28<sup>th</sup>

I interviewed mother again today. We had a quite good conversation together. She introduced the patient, Zhang Bei whom I shot last time. She discussed how she cured him, how he continued to visit her even after his recovery. I was quite satisfied with the lighting this time. We tried many times and in many places, but this time is the best.

June 29<sup>th</sup>-30<sup>th</sup>

Weekend.

July 1<sup>st</sup>

Today, my father, mother, brother and I had a short talk together. I asked them some questions. Brother talked about the *black box theory* of the differences between Western medicine and Chinese medicine. It was a very good point. Father also talked about something in his life. However, I felt that my father still did not confide.

The lighting was fine. Father's lighting was better than my brother and mother's. Until now, I found at least two places where the lighting was good. So I had more choices to have interviews. Mother was a little tired in this interview. I planed to have another interview with her when she is fine.

July 2<sup>nd</sup>-3<sup>rd</sup>

Today, I reviewed all the footage and mad future plans. I listed some potential shots necessary to supplement in the near future.

I bought a CD, attempting to use some in my documentary. It includes many Chinese traditional instruments. It sounds excellent.

July 4, 2000

I shot some photos again. In fact, these photos had been shot before, but I could not find them. I guessed that I made a mistake to use that tape again. Then the photo footage was covered by new footage. Anyway, the old footages were not good when I reviewed them, since the images appeared blue. I also shot the covers and pages of several books, *Ben Chao Gang Mu*, *Yi Lin Seng Mo*, and so on. They are quite old books. At first, I shot in the dinning room, but I found the lighting was not good for white pages. It was the old problem. I changed to the kitchen where the lighting was better. I was thinking about the camera. When I was in USA, I did not find the problem

of white balance. Even though it was automatic; it still worked quite well under most occasions. However, when I came here, it could not work well on most occasions. Maybe the color temperature of the interior lights in China is different from those in USA. So the camera only can work well outside, since the sunlight is the same.

July 5<sup>th</sup>

I shot all the old books that I found in my parents' study room. Most of them are more than thirty-six years old. My parents have a habit. They are not willing to throw away these old books even though they move from one city to another. Therefore, I had this opportunity to shoot these old books which accompanied them for most of their lives. I even found a hand-printed book which was made by a Chinese medical family many years ago. Even my parents cannot estimate the age of this book. The characters in this book are so beautiful and neat that you can hardly believe that it was hand-printed. These old books also are different from modern books. They have to be turned from left to right and read from up to down one volume by one volume. I cannot get used to reading in this way.

There are some drawings in certain books. Most are traditional Chinese style. They look very unique. I found several paintings about Li Shi Zheng. They vividly described the process that Li Shizheng tested hundreds of kinds of herbs and accomplished the famous book, *Ben Chao Gang Mu*. I used manual focus this time.

July 6<sup>th</sup>-8<sup>th</sup>

Weekend. The backache caused by the flight came back. I could not turn my back.

July 9<sup>th</sup>

My brother contacted the medical college for me today, so we went there. I intended to shoot some specimens in the department of Herbology. However, the secretary only allowed me to shoot several shots in very short time; moreover, the clerk who was supposed to be on duty was not there. I could not shoot in the morning, and I had to go there again in this afternoon.

At about 3 o'clock, my mother and I went there. We found the person who would show us around and control our shooting time. He showed us the specimen room and I shot very quickly. There are many herb specimens. Some are dry and others are in water. I liked the shapes of those herbs in water, so I shot more of them. I had to use auto functions, since I did not have enough time. Anyway, I got some shots.

July 10, 2000

My father asked a friend of his who is in charge of the other associated hospital of the Chinese Medical College to help me get shooting permission. He showed us around, so I did not meet any trouble this time. He let me shoot without any hesitance. I shot doctors, patients, paintings, medicines, and so on. This morning I was very blessed. I got many good shots; for example, acupuncture treatments, herb cooking, herb picking up, and so on. Like last time, I used auto functions, since I had to shoot very quickly. These shots are wonderful.

Nobody demanded any release permission; otherwise, they would not allow you shoot there. This is the way to shoot in China. No copyright, no release permission. It is quite different from the United States. The way to shoot in the United States does not work here. However, the most important aspect here is a relationship with the person who can allow you to shoot.

July 11th

I videotaped trees, flowers, and the cat in the garden of our home.

July 12-13th

Weekend

July 14th

I videotaped some old photos of mother's middle school and high school periods, father's university period, the young age of me and brother, and the whole family.

July 15th

I got up at 5 o'clock in this morning, since I would go to the hospital to shoot the herb cooking. The staff usually starts to cook herb soups at 4 o'clock every morning for several hours, and then send the soups to patients by 7 o'clock. If I want to shoot the herb soup cooking, I must be there by 6 o'clock. It was very hot in the room. I shot about more than ten minutes, and got about 7- minute footage. Everything was very smooth. The staff was very kind and patient to wait for me finishing my shooting.

July 17<sup>th</sup>

In this morning, I videotaped the dry herbs in my brother's prescription. Mother introduced every herb and the functions of these herbs in this prescription. It is very difficult to tell one kind of herb from another herb that is similar to it. Even my mother sometimes could not tell which herb it is. This depends on the experience of a doctor or a pharmacist.

July 18-21st

It rained today, which made the lighting unsuitable for shooting. I stopped shooting today because of this and took a rest to digest my footage of these days. I knew that I would not have much time to stay at home now. I also spent time talking with my mother.

July 22<sup>nd</sup>

I translated some terms and added more books into the bibliography.

July 23<sup>rd</sup>

We went to the medical arboretum of Gui Yang City today. I found that there were many herbs there; moreover, there were introductions and explanations about these herbs. I shot several herbs. I will come back again to shoot more. It is a good place to collect the images of herbs.

July 24<sup>th</sup>,

I videotaped more photos and re-videotaped the photos that were not good last time.

July, 29<sup>th</sup>

I went to the medical arboretum again. It is so amazing that there are so many kinds of plants (herbs) there. They have different kinds of shapes, functions, and smells. Mother, my aunt and I were astonished by God's creation. These creatures are beyond human's imagination. They are so diverse and beautiful. I shot many herbs this morning until the battery was used up. We found a restaurant and ate there, recharging the

battery. I wished that I could shoot more if I had more time, but I must leave for Beijing tomorrow. The shooting is almost finished.

### Rationales about Production

Through two years of studying Radio, Television and Film in the United States, I was able to use refreshed eyes to re-scrutinize my own culture when I went back to China. While I was in the United States, I experienced culture shock. When I went back to China, I experienced minor culture shock again. I could not stop comparing these two cultures which were reflected from their different attitudes to the camera.

The first problem that I struggled with was the release form. Actually, I was quite surprised to hear about this in the United States when I had classes at the University of North Texas. In the United States, release form can be a good and common way to protect filmmakers from lawsuits. However, in China, it may prevent you from getting footage forever. People are suspicious of and curious about cameras. On one hand, people do not trust each other, including filmmakers; on the other hand, they are anxious to be videotaped. Therefore, whether you can shoot depends on the particular situation. If the suspicion overwhelms curiosity, you'd better stop shooting. If curiosity overwhelms suspicion, you may start. This is very delicate and you must decide right there according to your careful observation. However, if you ask them to sign release forms politely, you will absolutely lose everything, (certainly, your family and friends are exceptions) because the release form will increase suspicions. As a video maker, I did not want to get nothing, since my goal was to get good footage, so I did not want to show them release forms and scare them away. But I studied media law in the United States and knew that a person's image is his/her property. I could not just shoot their images and use in whatever way I wanted without asking their permission. But if I asked their permission with release form or what else, I could not get any footage. I was

in a dilemma. After several trials, I found a way to solve this problem. I made myself obvious to them while observing their responses when I was shooting. If they appeared unwilling, I would stop shooting immediately. If they felt fine, I would continue. This worked well, especially when I shot in a hospital. (A section in the post-production chapter will discuss the ethical issues about shooting patients in the hospital.)

I have to say that our people still cannot handle media well. They do not know how to treat cameras which show up more and more often in their everyday life. They do not think that their images are their property. The legal rationale neither enacts nor enforces a systematic and detailed mass media law (including copyright law).

The other struggle was between the culture in China and the Western perspectives which I set up in the United States. The experience of studying and living in the United States gave me a new way of scrutinizing eyes to scrutinize our routine life. However, at the same time, I was also immersed in the routine life there when I went back to China. At the beginning stage of shooting, I could be very sensitive to the ordinary-like life in our family and could pick up a point which might be attractive to a Western audience. With the production going on, I became a little numb to this routine life by the influence of environment. Chinese medicine is an important subject in my documentary, but it is also very common in our family. If one is surrounded by it everyday, one may think it boring to discuss it. It may become like furniture which one seldom realizes exist. When I realized this kind of numbness, I tried to overcome it through meditating more about Western perspectives, since my audience will mostly be foreign.

There were two things I thought of often while shooting in China. The first was Professor Ben Levin's remark in the proposal meeting. He said that I needed to pay attention to two kinds of audiences in the USA: The ones who do not believe Chinese



medicine at all, and the others who have strong faith and even blind belief in Chinese medicine. This really clarified the audience that I would face in the future. The second was the video, *Mystery of Chi*. Moyers Bill was an interviewer who did not necessarily believe in Chinese medicine. He expressed a kind of attitude which was doubtful but open to change toward a medical approach from his own. I know the difficulties Western audiences might have in accepting Chinese medicine. It is in some ways similar to my own attempts at understanding the complicated American educational system. Based on these two points, I attempted to keep my eyes open to new insights. I chose to alter my previous design in the proposal. I gave up shooting the history and trends of Chinese medicine; instead, I emphasized some basic knowledge about Chinese medicine which, I thought, would be more suitable for most foreign audiences. I chose my mother as the one who explained Chinese medicine. I interviewed her about how Chinese medicine is diagnosed, how patients are treated with herbs, what caused diseases from a traditional Chinese medicine point of view, and so on. I also shot a sequence of her diagnosing a female patient who had an unknown swelling, and interviewed my mother about how she diagnosed and treated this patient. Through this sequence, the four methods of Chinese medical diagnosis were displayed so that audience would have at least a general configuration in their mind.

At the end stage of the production, I had obtained almost all the footages that I wanted. There were several categories: 1. Old photos of our family which would compose important biographic elements. 2. Covers and pages from Chinese medical books. These would help to make Chinese medicine more visual while my mother explains it. 3. Two sequences of my mother diagnosing patients and a sequence of my brother working in his lab. 4. Interviews of the family members, including their life experiences and their views about Western medicine and Chinese medicine. 5. Images of herbs which were shot mostly in the medical arboretum.

## Interview

In the original proposal, I intended to have informal interviews with my parents. In other words, I hoped to have videotaped conversations with them occasionally while they worked or went about their daily activities. However, I found that the lighting at our home was difficult to control and therefore this plan did not work out. The mixed lighting situation caused poor footage, just like my shooting journal mentioned. If I interviewed them outside, it was too noisy to be heard, since we live in China where every place is full of people and noise. Because of these factors, I decided to interview my parents in a conventional way, to let them sit down and answer my questions. This kind of style was actually quite formal and allowed me to control the lighting and the sound. Moreover, my parents did not look at me as a video maker. They still looked at me as their daughter, so they became relaxed while talking to me. Once when I asked a question, my mother interrupted me immediately and teased me about my question. This revealed her identity as a mother. Therefore, even though the style of the interview was formal, it showed an occasional informal atmosphere. I was satisfied with my identity as a daughter in these interviews. I believe with good listening and good questions, one can always get something from an interview.

## Crew and Equipment

I was the only one who was involved in the pre-production, production and post-production. This was the first time that I have shot all the footage by myself, which was a challenge for me. But I thought it worthy. I did not ask my classmates to help me, for I thought it unnecessary. If I asked others who are not involved in pre-production to help me during the production stage, it would take time and energy to communicate with them so that they might know my intention. I could not deal with this well while I was shooting, and therefore I served as the sole crewmember.

I used a digital-8 Sony ® DCR-TRV 120 video camera (Sony Electronics e-Solutions Company LLC, “Sony”, [www.sonymstyle.com](http://www.sonymstyle.com)) to shoot all footage. This was a tiny camera. Besides the automatic white balance problem that I mentioned in my shooting journal, I needed to keep it steady all the times. It weighed very little, but it was also easy to shake. I used a wireless microphone to record interviews. This was the main equipment that I used in the production. Fewer crewmembers and less equipment had several advantages, including less cost and ease of control. However, there were also disadvantages, including fewer camera angles and less attractive footage. I always think that technical elements are influential to film and television. I like the complex style of *American Dream* (Barbara Kopple, 1992), but mine cannot be like that for all the technical reasons mentioned. A one-person video or film is different from high-budget films or videos with large crews and substantial budgets.

## CHAPTER 3

### POST-PRODUCTION

Post-production was my favorite stage of the whole process, except logging and transcribing the footage. In logging, you record everything that you see and hear from the screen with a pen and a notebook so that you can find a certain shot easily. However, logging can also be tolerated when I anticipate the future editing. I like sitting down to view the footage and arrange the shots freely in my mind. I like reviewing them in my mind. I also like to see the video growing up one shot by one shot. I came back from China in the evening of August 6<sup>th</sup>, 2002. Several days later, I started logging and dubbing from all the thirteen digital-8 tapes to Mini DV tapes. This took about one week. Then the media service specialist Walter Deed told me that the editing lab was not ready for editing yet. I had to wait until the beginning of the semester, which was about one week. In this week, I finished my paper edit.

#### Paper Edit and the Rough Cut

Paper editing means to choose, arrange, and “cut” your footage on paper, which I believe is an important psychological process to visualize your video. I wrote only four pages of paper editing, but it took a quite long time to consider and imagine it. The rough cut was almost the same as what I proposed in the paper edit, except one or two minor changes. The paper edit was a very important step in the post-production stage. It was here that I first set the theme, the tone, the style and the structure of my documentary. I shot much footage about my family members’ personal experience, but I decided to only use those related to Chinese medicine. I also inserted sequences about the basic information about Chinese medicine. In the introduction sequence, I illustrated how herbs came into my own life with an image of herb soup being poured into a bowl. Then a group of herb images followed this shot. Music faded out and went on with the

herbs. I also added subtitles to introduce the names and functions of these herbs. This was the short opening sequence. Following this was a short introduction of my family with my narration and our family photos; then, my parents and brother's interviews about why they chose to study traditional Chinese medicine. When Mother talked about the difficulties that she had when she studied traditional Chinese medicine, she referred to some Chinese medicine information. I expanded this to let her explain more about it. Another sequence was about the contrasts between Western medicine and traditional Chinese medicine. My parents and my brother discussed their views about Western medicine and Chinese medicine. Then my narration transitioned to another issue: work and family, which my parents always struggled with in their lives. At the end of this documentary, my parents talked about their attitude toward death as doctors. My narration was the transition between all these sequences, which provided my perspectives on my parents' lives as traditional Chinese medical practitioners. I used a light-flower picture as the background of title in the beginning, which illustrated Chinese style aesthetics.

After I finished the paper editing, it was easier to accomplish the rough cut. I only needed to change the shots on paper into audio-visual shots in computer. The paper edit also helped me make the best decisions about which videotape shots to capture into the editing system.

During the rough cut, I struggled with ethical issues which showed up as a problem. Although I got the footage I wanted, I still needed to decide if I could use them during the editing process. For example, there was one shot where many needles were in a woman's naked abdomen. She was receiving the acupunctures to reduce her weight. Her abdomen was very big and bulgy. When I put this shot into one sequence, I hesitated, because I felt this shot might humiliate her. Although this shot was

impressive, I gave it up. I deleted it from this documentary. There were also other shots of patients in the hospital. Except for two shots which showed patients faces, I did not shoot patients faces. Most shots only revealed patients' feet, legs, or back so that they were unrecognizable. In those two shots of the patients' faces, the patients were not treated in a humiliating way, so I kept them in this documentary. In China, all these shots were trouble-free, even including the shots of the big-abdomen woman. Nobody would complain or sue a video maker about these since I had already gotten the permission from the hospital. However, in the United States, this is a controversial issue and these shots may be very risky. They may prompt ethical debates on the rights of documentary subjects. Even consent forms cannot rest the arguments. In *Ultimately We Are All Outsiders: the Ethics of Documentary Filming*, Calvin Pryluck criticizes the credibility of consent forms. The methods used to get release forms are also suspicious.

<sup>3</sup> In my opinion, this article overemphasizes the privacy and the right of a person but omits the labor of filmmakers and the rights of audiences. Documentary makers' responsibility is to let audiences know the story. The audiences' right is to know the story. If we only focus on the subject's right, the audiences' right may be hurt. For example, if a person does something wrong, and s/he is videotaped by a camera while s/he is doing the bad thing. Can s/he say that it violates her/his privacy right because the photographer does not get her/his permission to shoot? The audiences may be kept from knowing the person's bad deeds (maybe even crimes). However, what is worthy to be presented? Who decides what should be exposed publicly? All these questions trigger more debates. I will not discuss them here, since this is already beyond my

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<sup>3</sup> Calvin, Pryluck. "Ultimately We Are All Outsiders: The Ethics of Documentary Filming." *Journal of the University Film Association*, XXXVIII, 1 (Winter 1972). 22.

knowledge and the scope of this paper I only want to show my stand in this documentary. I, as a video maker, tried my best to capture attractive shots for audiences. I do not deny the potential hazards for subjects, although I tried all the best to avoid them through my own ways from my point of view.

## Second Cut

After I finished the rough cut, Professor Melinda Levin and I sat down together to watch it. She gave me some excellent suggestions, some of which I had not realized before. I summarize them as following: The first problem was the opening sequence. She reminded me that opening was very important for a documentary. It should be like a hook which can attract the audience's attention immediately. However, the group of herbs in the opening sequence might cause the audience to lose interest in this documentary. Since everyone has seen the close-ups of plants, those shots were not very engaging for audience. What I needed to do was to shorten them and put other set-up shots between the herb soup shot and these herbs. The second was about all the photos' zoom in shots. Most of them were out of focus and shaky. Professor Melinda Levin told me a way to make them better with digital editing software.

The third was the transition between shots and between persons. Although my narration was the transition between sequences, the transition between some shots needed additional consideration. A dissolve or fade in and fade out might be the better way for transition for some parts of this documentary, for example, from my mother's interview to my father's interview in which he appeared the first time, from one sequence to the another sequence, and so on.

The forth was the audio volume. Maybe because of the microphone, all the audio volume of interviews was too high. I needed to lower them.

In the second cut, I revised the rough cut according to all the above suggestions. However, one problem I encountered was the zooming in by computer to the still photographs. Since the number of particles of the photos was not enough to make the picture clear while we zoomed in, the image became blurred. The media service specialist, Walter Deed, who helped me in the editing lab, suggested me that I replaced with dissolve. He said that it also could get the same effect. I tried it. The dissolve looked much better than zooming in. So I decided to use dissolve. In the second cut, I needed to add subtitles for all the interviews and sequences. When I was about to start, the computer had a problem. The video monitor would not play frames any more. Only the canvas window, which shows images of the sequence in the computer, could play and even then at the wrong speed. I even could not record the sequences in the DV deck. This made me worried a little bit. After some Internet research, Walt Deed was able to fix this problem. He found that the original file had been corrupted so he made another copy of this file. The copy file was good enough to let me go on editing. However, we still are not sure about why this happened until now.

### Aesthetic Evaluation on Editing

Editing includes at least two tasks: selecting and arranging the sequences in general, and uniting these sequences in detail through audio-visual strategies one shot a time. To me, editing is like embroidery. You make a whole design in your mind and embroider one thread by one thread according to your blueprint. The arrangement and the stitches will compose the whole picture. The connections and the order between every shot in a film or video also make up of the pieces of the whole film or video. In embroidery, we use needles and thread; however, in editing, we use sound and images. In the following, I will articulate the proposed editing theory in the post-production stage.



## Vision

The editing strategies for fiction films and documentaries are a little different. A fiction film has a plot line and is produced in a controlled way, so it is easier to establish its pace and tone. Most documentaries are produced in a less controlled way,<sup>4</sup> so the lighting, the sound, and the composition of shots are difficult to fit into the same tone. Therefore, it is not strange that we can see the lighting changes dramatically between shots in a documentary. Jump cuts also cannot be avoided in many documentaries. Moreover, the editing of a fiction film is narrative. In a documentary, editing is to convey information. For example, Cut-aways are commonly used. When an interviewee talks about something, the related pictures are inserted. The intention of cut away is not the development of a plot line but the processing of a thought. I used many cut-aways in this documentary. For example, in one of my mother's interviews, she mentioned that her grandmother influenced her choice to be a Chinese medical practitioner. I kept her voice-over on but left her image and inserted a photo of her grandmother. This could help visualize her interview. However, this motivation of cut-away was intrigued by her thought processing. Moreover, cut-aways in interviews can avoid making viewers bored. It is easy for viewers to lose interest in the documentary if they look at the same image for a long time. Cut-aways can introduce new information to viewers. Bill Nichols mentions that the pleasure of viewing a documentary is to know information.<sup>5</sup> The information in a documentary should be interesting and intense enough to attract viewers. Therefore, editing also should be informational.

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<sup>4</sup> There are also some documentaries produced in a controlled way.

<sup>5</sup> Nichols, Bill. *Representing Reality: Issues and Concepts in Documentary*. Bloomington: Indiana University Press, 1991. 76-77.

Another editing strategy of this documentary was the fade in and out. This is a common transition used in both fiction film and documentary. Fade in and out can arouse a beginning feeling and adjust the pace of the whole film or video. I used this method in the opening sequence, between several interviews, and the ending sequence. When this strategy was combined with the music and the motion in a shot, it could make a good motion effect between shots. (See the opening sequence of this documentary).

Beside those mentioned above, I tried to keep the fluidity between shots with ordinary editing principles such as a motion shot (either camera's movements, characters' movements, or both) follows another motion shot and a static shot follows another static shot. This is quite difficult for a documentary. Sometimes, I could not avoid jump cut, because I had to sacrifice the aesthetic pursuit to maintain a united content.

### **Audio**

There are four kinds of sound in this documentary: the interview, my narration, the music, and the sync sound. I did audio editing three times. The first time, I added music but deleted all the synchronous sound of cut-aways. In the second time, I was inspired by Professor Melinda Levin's advice. I added back the synchronous sound of cut-aways, but lowered the volume levels. This made a thicker sound background. I tried my best to eliminate the audio editing noise and add audio transitions in order to make sure the audio goes on smoothly the third time. Therefore, in the finished version, the synchronous sound produces a realistic background sound. The music magnified the

emotions. My narration produced a transition between sequences and magnified my emotions. The interviews make up most of the content.

The music I used in this documentary was a traditional Chinese piece named *Partridges Flying* which was mainly played by a Chinese flute. I felt its tone fit the whole documentary very well. However, I used this piece without asking the performers' consent for two reasons. The first is that in China, there are no license organizations as in the United States. It is difficult for people to contact the copyright holders. The copyright law does not enact well in China, which is a big issue argued again and again in the United Nations. However, in domestic China, artists just share what they create. When I first came to the United States I had no copyright concept in my mind. I know it is difficult to explain this kind of situation here. It is a different understanding about people's properties. The second reason is that I may not exhibit this documentary publicly. If I decide to show it publicly, I will try to clear the copyright problem.

### Equipment

This documentary was post-produced in the editing lab of the department of Radio, Television and Film in the University of North Texas. I used Final Cut Pro® 3.0 non-linear editing software based on a Macintosh® computer (Apple Computer, Inc. [www.apple.com](http://www.apple.com)), connected to a Panasonic® AG- DV 1000P deck and Panasonic CT-1386AD TV monitor (©Matsushita Electric Industrial Co., Ltd., Secaucus, NJ, [www.panasonic.com](http://www.panasonic.com)) I was assigned a 75-gigabyte hard drive. I recorded my narration in one of the audio studios in the editing lab. The audio program that I used is Cooledit Pro® ( Syntrillium Software Corporation, Scottsdale, AZ, <http://www.syntrillium.com>).

I edited all the sound with Final Cut Pro 3.0. The reason that I chose Final Cut Pro was because I am quite familiar with this software, since I used it in Professor Ben Levin's class several semesters ago. (See Appendix C for the detailed list of the equipment.)

## Translation

Translation was a very important part in this project. It was also a difficult task. Since Chinese medicine has many ancient Chinese literature expressions. Even ordinary Chinese people could not understand them sometimes, and I needed to translate them into modern English. It also meant to translate a culture into another culture. I mainly used two dictionaries: One is Chinese-English dictionary; the other is Chinese Herb dictionary online. Actually, some words could not be properly translated, because even though they could be translated directly, they could not be understood in English language.

My guiding principle in translating was to make interviews and terms brief and clear. I hope that I reached these standards. Translating a video is different than translating literature. It demands an efficiency of words, which means to be understood easily and immediately. The words, either in narration or in subtitles, must be succinct and clear. A viewer cannot go back to read them if they are too obscure. In a book, you may go back anytime if you do not understand a word. I have attached the English subtitles with this thesis (see Appendix E).

## CHAPTER 4

### THEORETICAL ANALYSIS

I maintain that there are many kinds of theories about documentary. For example, there is one theory dealing with the production, the techniques, and the aesthetics of documentary. I call it technical theory. This kind of theory focuses on how to make documentaries, how documentaries attract audiences, what kind of techniques produce certain aesthetic effects. Many filmmakers and professionals have written books to discuss these problems. There is also another kind of theory which concentrates on the culture, the ethics, and the effects of documentary set under a general social-cultural background. Many film critics have participated in developing this kind of theory, such as Bill Nichols, Barry Keith Grant, Erik Barnouw. These two kinds of theory emphasize the different aspects related to documentary. When considering this theoretical chapter, I am not sure what kind of theory I should write about. What stand should I take to look at my documentary? Should I just summarize my producing experience? Or should I review this documentary with a cultural perspective and thereby expand this chapter to a wide social-cultural dimension? The role I chose in this chapter is that I look at it differently from a pure critical looking. On the other hand, this is a theoretical and conclusive chapter. I need to be as objective as possible in looking at my documentary in order to gain experience and promote my future productions if possible. This demands that I compare and contrast other works and analyze those technical and cultural theories. Therefore, I decided to relate, compare, and argue some theories based on my own experience of producing this documentary.

## Personal Is Political?

This documentary is a biographical description of my family members' relationships with Chinese medicine. Biographical documentaries have special meaning to women making documentaries. When the slogan "personal is political" was put forward in the 1970s, women's personal experience has been emphasized in cultural media, including literature and film. I must admit that in this documentary, my mother had a heavier roll than others. I chose her as the person who explained the basic information of Chinese medicine. I also emphasized her experiencing the confliction between work and family. It is a little hard for me to explain my motivation for doing this. In relationship, I may be closer with my mother and I am interested in a woman's experience on this issue. Moreover, in my sub-conscious, I may want to address this issue of working women. This reminded me of another documentary made by a woman. *Nana, Mom and Me* (Amalie R. Rothschild, 1974) explores the conflicts between family and work which the three generations of women met. The film also displays the relationships between the filmmakers' grandmother, her mother and herself. *Nana, Mom and Me* reveals the optimistic expectations of the freedom that a woman has who works out of home. However, after over two decades, this issue appears much more complicated than the first and the second wave feminists expected. <sup>6</sup>Workingwomen may cause harm to themselves and the next generation if they do not know exactly the roll work should play in their lives. <sup>7</sup>Comparing *Herb and Life: A Chinese Medical*

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<sup>6</sup> The first wave feminism focused on women gaining political equality of rights, such as the right to education, the right to work, the right to own property, and so on. The second wave feminist maintains "the personal is political" and emphasizes women's personal experience as a valuable source.

<sup>7</sup> Read more about this issue in Wallis, Claudia. "Onward, Women!" *Time*, Cover Story. December 4, 1989. 81-82.

*Family and Nana, Mom and Me*, the way that I addressed this issue was quite mild and subtler, since the main theme of this documentary was not the role of working mothers.

Is personal political? Maybe it is, under certain contexts and eras. However, I think those women documentary makers are very brave to expose their personal or their family's experience for raising public consciousness. It may be because of a different cultural background, I do not have such encouragement to use my own personal or my family's experience to raise a certain kind of political consciousness in society. In our culture, we seldom talk about ourselves. Therefore, making this documentary was a process for me to overcome the long-time obstruction of isolating myself from society and learning how to share my own life with others. Even though this documentary was only a limited sharing, it was a big step for me to take. However, I am still struggling with the exhibition and distribution of this documentary. The subjects are my own family members who will be vulnerably exposed if I distribute this documentary publicly. I cannot help thinking the possible situation if this documentary is exhibited publicly either in the United States or in China. I am struggling with this problem. The result is unknown at this time. What puzzles me is whether those women documentary makers also struggled with this problem? How do they deal with it? Maybe I will find the answer in the future.

### The Approach

When I was conceiving this documentary, I did not consider using a certain category of approaches, such as direct cinema or cinema verite. I just attempted to tell a story about my family. I knew I needed their interviews, the observational sequences, my own narration, and so on. I would decide what content I needed in the interview,

what content required my narration, and what content could be shown more clearly by observational sequences. In my case, the approach for this documentary appeared in my mind in a more concrete way.

I also feel a little upset with this kind of dualization of classification: direct cinema or cinema verite; cinema verite and non-cinema verite. Since the cinema verite movement in the 1960s, this word has seemed to become so popular that it may be beyond the original intended meaning. From a name of a film movement, it has evolved to an aesthetic style or an adjective to describe a documentary or a sequence. I suspect that it may be used to describe a fiction movie in the future. After a documentary is produced, a critic may classify it a cinema verite or not. However, from my experience of producing this documentary, I think a style and approach of a documentary mostly comes from the documentary maker's experience, education, personality, and psychological background. Sometimes, it is also related to the theme of a documentary. For example, *Herb and Life: A Chinese Medical Family* was about the relationship between my family and Chinese medicine. This theme made it impossible to take a detached stance and calmly observe the subjects as direct cinema does. The relationship between the subjects and me had already determined how I should be involved in this documentary. To what extent I should be involved? This was another question also related to my theoretical background. I accept the idea that a film or video cannot represent a pure objective reality for audiences.<sup>8</sup> However, if we admit that we cannot know a reality from a film or video, we also admit that we do not have the ability to tell

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<sup>8</sup> "Even if the filmmakers attempt not to control or encode the pro-filmic event, certain decisions about reality are made: the choice of subject and the location of shooting (not to mention the preconceptions, no matter how minimal, of the filmworkers), all participate in, control and encode the pro-filmic event within the context of the technology of the cinema and the dominant ideology." Eileen, McGarry. "Documentary Realism and Women's Cinema." *Women and Film*. Vol, 2. No. 7. Summer



what the truth is; instead, we have to rely on the filmmakers completely. My opinion is that an audience will know a reality from intertextual reading.<sup>9</sup> In contemporary society, we do not have contact with only one film or video. We are immersed in audio-visual information. An audience member who is really responsible for her/his search for truth should decide what s/he believes from all the information that s/he knows. On the other hand, a documentary maker, I believe, should tell audiences that his/her representation of reality is only one kind of perspective among many. This is why I decided to show my participation in *Herb and Life: A Chinese Medical Family* to audiences. In the opening sequence, I established my point of view. I told the viewers my experience with Chinese medicine, what I thought about being a doctor, and my attitude to my parents' vocations from my narration. This was the approach that I used with the subjects: showing audiences my perception of my family and Chinese medicine, and telling them clearly this is my point of view.

To me, it would have been very weird if I had treated this theme with the same observational approach that Fred Wiseman used his institutional documentaries, such as *Hospital* (1969), *High School* (1968) and so on. I not only reflect myself in this documentary but also am one of the subjects. In other words, every documentary may become self-reflexive if the makers are willing to do it, but not every documentary can include makers as its subjects like *Herb and Life: A Chinese Medical Family* does.

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<sup>9</sup> Read more about intertextual reception studies in Bennett, Tony, "Texts in History: The Determinations of Readings and Their Texts." *The Journal of the Midwest Modern Language Association*. Vo. 18. Fall, 1985.

## CHAPTER 5

### EVALUATION OF THE COMPLETED WORK

Actually I was very surprised to find that the production went as smoothly as It did. Except for several minor changes, the final version was quite similar to what I expected in the pre-production stage. I had prepared to change my approach after the production started, but this was not necessary, except for the way to interview my family members. The proposal was well implemented.

#### Pre-Production

In the pre-production stage, I gained basic information about this documentary, including my family members' history with Chinese medicine and some Chinese medical terms. I also developed my original blueprint for this project. Although the blueprint was not very detailed, it pointed out the direction of future production. I spent much time on research in this stage. The videos and books that I watched and read helped me much with my design for this documentary.

#### Production

I encountered several problems in production, which made me somewhat dissatisfied with this stage. The lighting problem and the shooting permission for that hospital bothered me for quite a while. I did not notice that my father's shirt in the interviews would make the future subtitles difficult to read. I just kept shooting his interview when he wore that shirt. This was a big flaw in production. However, I still got the footage that I expected. From my experience of this project, I feel that production is the least controllable stage of the whole process.

## Post-Production

I was quite satisfied with post-production. Since I did not have much time to polish my editing, I made decisions very fast. Sometimes, I did not want to look at it any more. Other times, I wanted to revise it again and again. Although the documentary is supposed to be completed, I still do not feel that it is perfect and I want to revise it again! I do not know if this is good or bad.

In summary, during the pre-production, production, and post-production of *Herb and Life: A Chinese Medical Family*, I learned much practical experience about documentary production. Moreover, I gained more knowledge about my family members and Chinese medicine. I also want to thank all who have helped me: my family, my committee members, media service specialist Walt Deed, my friend Anna F. Hudgens, and the One who gave me breath, wisdom, imagination, and creativity; the Lord.

## APPENDICES

## APPENDIX A

### POTENTIAL SHOTS IN ORIGINAL PROPOSAL

My university in Beijing (Beijing Normal University)

My parents' and my older brother's medical school (Gui Zhou, Gui Yang Chinese medical School)

Our home in Gui Yang City (Pan Tao Gong Road 1#)

My father's current institution (Gui Zhou Provincial Dermatology Research Institution)

The hospital where my mother used to work in Gui Yang City (Gui Zhou Justice Department Hospital)

The hospital where my parents used to work in Xin Yi (Xin Yi City Hospital and Xin Yi Chinese Medical Hospital)

My mother's high school (Gui Yang Women's High School)

APPENDIX B  
ORIGINAL BUDGET

Color  
Medium: Video

Length: 30 minutes  
Shooting Ratio 40:1

	Unit price (\$)	Duration/ Quantity	Fund Requested (\$)	Total Requested(\$)
<b>Production Personnel</b>				
Producer	350	45 days	In-kind	In-kind
Director	350	30 days	In-kind	In-kind
Director of Photography	400	30 days	4000	In-kind
Audio	200	30 days	2000	In-kind
Editor	200	15 days	In-kind	In-kind
<b>Professional Services</b>				
Interview-my family members	0	0	0	0
<b>Production Supplies</b>				
Camera tapes (Hi-8 60 minutes)	7.5(Sony)	20	150	150
Master/Edit Tapes	120	1	120	120
1/2' VHS	4	30	120	120
<b>Office Supplies</b>				
Copying Costs			30	30
Telephone			100	100
Printing Costs			50	50
Faxing			20	20
<b>Equipment Rental</b>				
Camera Package (with Batteries)	500	30 days	15000	In-kind
Microphones	45	30 days	1350	In-kind
<b>Facilities Rental</b>				
Off-line Editing	25	80 hours	2000	In-kind
On-line Editing	250	10 hours	2500	In-kind
Audio Recording and Editing	35	4 hours	140	In-kind
<b>Travel/ Transportation</b>				
Lodging/Food	10	40	400	400
Mileage (air tickets and car tickets)			1200	1200
<b>Miscellaneous</b>				
Copyright Fees			500	500
<b>Total</b>				2,690
Insurance Fees 10% total				2,69

Total: \$2950

After I finished this documentary, the budget changed. I did not use some items that I proposed in the original budget, for example, copyright fees, the edit master tape, insurance fees, and printing cost. Some items cost different amounts of money from those in the original budget, such as telephone fee, lodge and food, and so on. There was also a new item which was not expected in the proposed budget, the digital tapes for conversion. Therefore, I list the actual budget in the following.

#### ACTUAL BUDGET

	Unit price (\$)	Duration/ Quantity	Fund Requested (\$)	Total Requested(\$)
<b>Production Personnel</b>				
Producer	350	45 days	In-kind	In-kind
Director	350	30 days	In-kind	In-kind
Director of Photography	400	30 days	4000	In-kind
Audio	200	30 days	2000	In-kind
Editor	200	15 days	In-kind	In-kind
<b>Professional Services</b>				
Interview-my family members	0	0	0	0
<b>Production Supplies</b>				
Camera tapes (Digital/Hi-8 60 minutes)	4.5(Sony)	16	72	72
Digital Tapes (for conversion)	7.5(Sony)	12	90	90
1/2' VHS	2	10	20	20
<b>Office Supplies</b>				
Copying Costs			10	10
Telephone			60	60
<b>Equipment Rental</b>				
Camera Package (with Batteries)	500	30 days	15000	In-kind
Microphones	45	30 days	1350	In-kind
<b>Facilities Rental</b>				
Off-line Editing	25	80 hours	2000	In-kind
On-line Editing	250	10 hours	2500	In-kind
Audio Recording and Editing	35	4 hours	140	In-kind
<b>Travel/ Transportation</b>				
Lodging/Food	10	60	600	600
Mileage (air tickets and car tickets)			1200	1200
<b>Actual Total Cost</b>				\$2052

APPENDIX C  
THE EQUIPMENT LIST

Production

Sony Hi8/Digital DCR-TRV 120 camera(Sony Electronics e-Solutions Company LLC, “Sony”, [www.sonymstyle.com](http://www.sonymstyle.com))

PRO 88W VHF wireless microphone system (Audio-Technica. U.S. Inc., Stow, Ohio)

Post-Production

Final Cut Pro® 3.0 non-linear editing software (Apple Computer, Inc. [www.apple.com](http://www.apple.com))

Panasonic® AG- DV 1000P deck

Panasonic ® CT-1386AD TV monitor (Matsushita Electric Industrial Co., Ltd., Secaucus, NJ, [www.panasonic.com](http://www.panasonic.com))

Cooledit Pro. ® 2000 audio program (Syntrillium Software Corporation, Scottsdale, AZ, <http://www.syntrillium.com>)



## APPENDIX D

### NARRATION

**A:** Whenever I get ill, my mother feeds me a kind of bitter, dark, and strong smelling medicine soup which is totally made up of natural herbs. I still remember when I was fed this soup the first time, I vomited almost all of it, for the taste and the smell seemed so terrible. However, as I grew up I got used to this healing medicine which could help me become healthier, for we, the Chinese people, believe such herb soups have a magnificent effect to cure people. For thousands of years, the Chinese people have collected numerous natural herbs as medicine.

**B:** While growing up, I came to the realization that my family was a little special. Both of my parents were traditional Chinese medical doctors. My brother also went to the same Traditional Chinese Medical College that my parents did.

**C:** I am curious about my family members' choice to practice traditional Chinese Medicine. In the summer of 2002, I went from the United States back to my hometown, Gui Yang City, a hill city in southwestern China in order to explore my family's history associated with Chinese medicine.

**D:** My parents also expected me to be a doctor, either a practitioner of traditional Chinese medicine or western medicine. However, I left my hometown to study at a university in Beijing, very far away from my home. I did not want to be a doctor. I was afraid of pain, weakness, and death.

**E:** Chinese medicine is a very difficult subject and only those who have perseverance and who really love it can stand up to its rigorous demands. I think my parents must have experienced many difficulties while learning it.

**F:** I still remember the knocks at the door in the middle of the night when I was a child. The knocks were for emergencies. I often experienced the fear of my parents' sudden departure.

In darkness, I was left alone. Although I did not know those patients, I was jealous of them. A little girl used to walk through the long passage of a hospital seeking her parents while hearing the moans from patients and smelling the strange odors of medicine. That girl was me. I often felt I was fighting with them for my parents. During the shooting process, I communicated with my parents about this.

**G:** In the end, my brother did not become a traditional Chinese medical practitioner as my parents had expected. He found a job in the AIDS Prevention Center of Gui Zhou province. He is quite satisfied with this job.

**H:** I did not want to become a doctor because I was afraid of pain, weakness, and death. I knew that I could not handle the pressures from all of these. However, my parents have to face these in their whole lives.

## APPENDIX E

### SUBTITLES

**Mother:** Why did I want to be a Chinese Medical doctor? I was interested in doctors when I was a child, because I was very weak and had many diseases at that time. I went to see a doctor very often. My grandma was from Si Chuan. She did not trust Western medicine, but adhered to Chinese medicine. She brought me to see Chinese medical doctors every time. When I went to middle school, my mother had cirrhosis. She had hepatic coma and ascitic fluid accumulated. We were very young at that time. She stayed in the Associated Hospital of Traditional Chinese Medical College. We went to see her. This was the first time that I saw those cirrhosis patients. Their abdomens were so big and their faces looked yellow like an orange. It was so scary. Then, she was not willing to stay there. Since that hospital also practiced Western medicine, they would draw off ascitic fluid from patients' abdomens. She saw her neighbor patient's abdomen grew big again very quickly after the ascitic fluid was drawn off in only several days. She was not willing to have this procedure, so she went back home and took Chinese medicine. During my high school years, she kept taking Chinese medicine. When I went to the Traditional Chinese Medical College, she had already taken Chinese medicine for the fourth year. She recovered and went to work again. When I was in the senior year of high school, my mother kept taking Chinese medicine at home and two of my classmates, Yunshou Cheng and Shukun Wang's fathers were two of the four most famous Chinese medical doctors in Gui Yang City. So, Chinese medicine made a very deep impression on me. When I was ready to go to university, I wanted to study

Chinese medicine, so I chose the Traditional Chinese medical department of Gui Yang Medical College.

**Father:** Why did I want to be a Chinese medical doctor? Our home was in a very isolated, a very poor and underdeveloped village. Because people there were so poor, they lacked doctors and medicine. Many persons died of diseases because they did not get treatment in time. Some were very young. I experienced this myself. I once had seven older brothers. I was the youngest. I still remember how your uncle who was the seventh brother died in his 16th year. Now I think it might be phthisis. Therefore, when I saw this, from my heart I was eager to save those patients. After I graduated from high school, I chose to go to the Medical College. Why did I study Traditional Chinese Medicine? Because our village was lagging behind, I actually did not know the differences between Western medicine and Chinese medicine at that time. I only saw the requirements for medical schools. Western medicine needed five years of study, but Chinese medicine needed six years. I thought that I would learn much and become an intelligent doctor after six years of study so that I could contribute much in the future.

**Brother:** My younger sister would not study medicine and so my mother nagged me every day. She said that if you would not study medicine, what would I do with my medical books? My books would not be passed on the young generation of our home. So I was forced to choose the study of medicine by all the pressures.

**Mother:** Did you want to study engineering before?

**Brother:** I wanted to become an astronomer before.

**Mother:** An astronomer? Yes, he seemed to want to study science.

**Mother:** Herbology was a difficult field for me at that time. Since Chinese medicine is empirical; for example, Li Shizheng who wrote *Ben Cao Gang Mu* tasted several hundred herbs. He tasted every herb in that book and figured out what diseases it could cure. He also observed animals. For example, a snake was beaten black and blue. He saw it ate a kind of herb and recovered. He thought this herb might work for wounds. He tested this on patients. It really worked. Cats also know how to cure themselves. You see this, when a cat is ill. It has eaten too much and vomited. It will find some green grasses to eat. They are the ordinary grasses. I saw it eat. In Chinese medicine, there is a medicine called cicada's cloth (*Cryptotympana atrata* Fabr). The cicada's cloth can relieve the exterior symptom with warm in property and cure cold. Moreover, it also has another effect: cure the lost or cracked voice because of a sore throat. It was hard for me to understand this. I said to the teacher, "Teacher, how can it cure lost voice (aphonia)?" The teacher said, "It is the principle of comparing something with those of the kind. Because cicadas can make very loud sound, it can cure aphonia." Who believes this? Oh, if I find anything which can make very loud sound, can this thing cure aphonia? It is impossible. We could not understand. We felt it impossible. We told the teacher, "Teacher, we cannot understand the principle you said." The teacher explained to us, "This is to compare something with those of the kind". Since ancient Chinese thought it could make very loud sound and the person who had lost his voice, they let him try it. Then he really was cured after he took it. Therefore, ancient Chinese recorded this. There are no other reasons. We students actually could not understand. Finally, the teacher said, "Do not dig it up by the roots. This is the experience from ancient people. You only need to remember that it can cure this. Such medicines are too

many to explain to you one by one. You just need to remember its several functions in the book. My difficulty was here. I had to memorize by rote. Western medicines can be disintegrated into molecules. What chemical reactions and effects that they will have in body? You can know very clearly from these explanations. There is no way to explain Chinese medicine. You just remember what the herbs can cure.

**Mother:** These are fringed pink (*dianthus superbus*) and *Hedyotis diffusa* (*herba hedyotidis Diffusae*).

**Me:** What effect does *Hedyotis diffusa* have?

**Mother:** For clearing heat, fire toxicity and reducing abscesses. Oh, a king herb is missing. *Malva verticillata*, L. It is not here.

**Me:** What effects do these *Artemisia capillaries* have?

**Mother:** For clearing wet heat in liver and gall, because your brother's situation is a little different.

**Me:** What are these? They look like gingers.

**Mother:** These? They are *Rhizoma Atractylodis* (*atractylodes lancea* Thunb).

**Mother:** This *Lygodium japonicum*, Sw. is the king herb to cure kidney lithiasis.

**Me:** Oh, what is this?

**Mother:** A kind of medicine.

**Me:** Is it a plant or a mineral?

**Mother:** A plant.

**Me:** What is the white thing?

**Mother:** This is talcum which can clear heat and diuresis. It is popular, but it is not the ordinary talcum which is used on gloves in hospital. This is edible talcum.

**Me:** How do you know it is edible?

**Mother:** Is not edible? We use this in Chinese medicine, so it is different from that of Western medicine. Do not use the wrong talcum. That kind of talcum is for lubricating plastic instruments.

**Father:** In Chinese medicine, those original works are very difficult. You need a strong literature background. If you read only colloquial version, there is no difficulty. In original works, some words are hard to tell the meaning. You must look up in a dictionary, but certain words cannot be found in ordinary dictionaries. You must look for them in the Kangxi dictionary, and if you do not know how to look up, you cannot find them. Therefore, Chinese medicine is hard to learn since the ancient literature is very abstract.

**Mother:** Chinese medicine has a set of its own theories which is called “Five Elements” and “Zang Fu” theories. A human is looked as a whole. Heart, liver, spleen, lung and kidney operate harmoniously. If one of them has pathological changes, a person will be ill. Why do they have pathological changes? Because the inter-relationship between the Five Elements. These organs are associated with the Five Elements: the heart is associated with fire, liver with wood, kidney with water, spleen with earth. This theory actually emerged from the observation of nature. Earth produces myriads of things. Human is said to be of the earth. When you were born, you were very weak and very small. However, after you eat food and absorb the nutrition through your spleen, stomach, bowels, and so on, which is your whole digestive system, you can grow up strong and big. Why is the spleen associated with earth? It is like “Earth produces myriads of things.” What causes diseases? Chinese medicine accounts two categories of

pathogenesis. One is wind, cold, hot, wet, dry, and fire. If it is too windy, you may have cold. If it is too cold, you may also have disease; too dry, you may be ill. In very hot days, you may have heatstroke. If you live in a wet place, like here in Gui Zhou, you may have arthritis. Fire means the outside fire and inside fire. These are natural phenomena which are the external pathogeneses. The other is emotion. Chinese medicine deems human's emotions may cause diseases. Happiness, when you are too happy, you may have diseases. Anger, megrim, worry, sorrow, fear, astonishment are called "seven emotions". In Western medicine, there is also melancholia. When you are worried too much to eat, it hurts your spleen, so it makes you ill. It makes sense. Then, when a patient comes and you diagnose him, there are four examinations in Chinese medicine. Since I learned Western medicine, I know that there are also four examinations in Western medicine. The four examinations of Chinese medicine are: looking, smelling, questioning, and pulse taking. Those of Western medicine are: Looking, palpation, percussion, and hearing. For example, in Chinese medicine, look at the color of a patient's face as soon as he comes in. If the color is as yellow like orange, he must have hepatitis. Looking at tongues is very important. It includes two parts: one is to look at the quality of a tongue which includes the color of the tongue; the other is to look at the surface of a tongue. Pulse taking means to know qualities of pulse, which is very important. There are twenty-eight kinds of qualities of pulse. This is difficult to tell. I had difficulty learning at that time. It was difficult for not only me but also everyone. It can be understood by your heart but it is hard to express. In other words, you know it in your heart and you can sense it, but you cannot describe it. You have to feel by yourself. For example, "slippery pulse" is one type of pulse quality. How is it



described? It is like pearls rolling in a plate. It is the same movement when you touch pearls while they are rolling.

**Me:** But what is the difference between touching pulses in Western medicine?

**Mother:** In Western medicine, it is to count the numbers.

**Me:** No such senses?

**Mother:** No such senses of twenty-eight qualities of pulse. The normal pulse feels quite slow, soft, and even. If you touch a pulse lightly, it jumps very fast and “duo, duo, duo” pushes up your fingers. It is a float pulse. Float pulse proves the patient has a cold.

There is another kind of pulse, knotted-ribbon pulse. The patients who have heart problems have it. It is called corona heart disease, which I have now. The pulse jumps once and pauses, jumps, pauses, jumps, pauses... or jumps and pause three times. Duo, duo, duo, then, pause, duo, duo, duo, like a ribbon waving. Another kind of pulse, knotted pulse jumps and pauses longer, jumps, pauses longer, jumps... Western medicine has “Looking, palpation, percussion, and hearing”. Western medical doctors also look. “Palpation” tells us whether there is any swelling. In Chinese medicine, we also feel patients’ swellings, but it is included in “looking” examination. Is the swelling depressed or hard? Some nephropathy patients have swellings. As soon as you press his/her swelling, there is a big socket. However, if the swelling is in the beginning stage which often appears in acute nephritis cases, you cannot press a socket even though his eyes, feet, and the whole body are swollen. This is called a hard swelling. Since I learned both Chinese medicine and Western medicine, I use both when I diagnose. Based on the four examinations, I will tell what disease a patient has; then, I will make a prescription.

**Father:** A doctor's work is very demanding. Nurses are even more, for nurses are not allowed to sleep in night shifts. We can sleep sometimes. If something happens, nurses would wake us. After we finished work in the mornings, we went shopping and cooked for you at noon. When it was time to go to work, we went to work in the afternoons. In evenings, after we took care of you, we could take a rest. But we still had night shifts sometimes. Only one of us could stay at home.

**Mother:** I was extremely tired in the early years after my graduation. From 8 am to 12 pm, I diagnosed patients. Two persons in the pharmacy were not enough to pick up herbs for me. Another doctor and I made about six hundred copies of prescriptions one day. A prescription has two or three copies, so we made several hundred prescriptions per day. From 2pm to 6 pm in afternoons, I was still working while others got off work. After I made a prescription for a patient, s/he came back the second time. I could not remember her/his name, but I could remember her/his prescription and what kind of medicine s/he had taken. Others thought that I was weird, but I thought this unimportant. I thought the prescriptions were the most important. I could remember their symptoms and would ask what symptoms had gone and what were still there after they had taken medicine. I remembered these very clearly. It was because I was too devoted. I dreamed of all kinds of herbs, chrysanthemums, Flos Lonicerae japonicae (Caprifolia cease, honey sucker flower)...at night. I was extremely tired at that time.

**Me:** I remember when I was little, you were always called to leave home by the knocks at the door at mid-night.

**Mother:** At midnight, I was called to treat patients by telephone and sometimes from downstairs. At that time, I was the director of the internal medicine department.

Sometimes I treated patients till 8 or 9 pm. When I went back home, I saw you two sitting before the stove where the fire was extinguished. I asked you two if you had eaten your dinner. You said no. I had to cook immediately. What way did I have? To speak plainly, I really felt tired. However, I liked this work so much that I even went to study Western medicine for I thought my Chinese medicine could not follow this era. Two fists are stronger for fighting than one fist. I wanted to improve my technology and knowledge. Moreover, I was specializing in kidney diseases. Kidney transplantation and peritoneum dialysis were introduced into China. I needed to know all these changes, since it has been different from before.

**Father:** Western medicine is pragmatic and detailed. For example, if there are tubercle bacilli, we kill tubercle bacilli. It is very direct. Compared to modern sciences, Chinese medicine is quite general and overall. There is not a concrete treatment for phthisis. It cannot be said that Chinese medicine cannot cure phthisis. It can cure sometimes, but how it cures there is no way of telling. Therefore, Chinese medicine has its own shortages, which we should admit. That is why we advocate combining Chinese and Western medicine.

**Brother:** For example, if the box is sealed up and there is a substance inside, Western medicine and Chinese medicine have different ways to determine what the substance is.

**Mother:** *The Black Box Theory* of Chinese medicine.

**Brother:** Right. What will Western medicine do? It will open the box, find this substance, and observe it directly. It may analyze it from micro dimension and know its parts. Based on these parts, it is constructed a whole impression. So there is anatomy in Western medicine. It is the same principle to know human body. Chinese medicine is

different in knowing the substance in the box. It will turn the box up and down, hear the sound, weigh it, and feel the shape. After many times trials and speculations according to the whole, it makes conclusion. Compared to Western medicine, it has limitations. What kind of limitations? It can only have a vague description and is not as precise as Western medicine. But what is its advantage? Its descriptions are very comprehensive.

**Me:** What are these yellow things? Are they gingers?

**Doctor (D in the following):** Yes. These above are moxas.

**D:** Injection in acupoints.

**Mother:** Injecting into acupoints is very effective.

**Another doctor:** Twisting needle.

**D:** This is Ying Ming Quan which is located under the knees.

**D:** The other one is Yang Ming Quan.

**Another doctor:** This is Zhusheng.

**D:** Yang Ming Quan acupoints is three inches under the knees.

**Another doctor:** This is Zhu San Li.

**D:** This is Tai Chong.

**Father:** As a doctor, the happiest thing is: when you meet a person in a street, he greets you, but you do not recognize him. He says that he is one of your patients and is recovered now. When you hear this, you feel so happy in your heart. This is your achievement. The recovery of patients is the greatest reward for a doctor.

**Mother:** After I learned Chinese medicine, I was interested in it more and more. For I cured some diseases that Western medicine could not explain and cure, I would be very happy secretly in my heart. That is it.

**Father:** As a doctor, the saddest thing is that you cannot cure some patients, because patients come to seek you, with a kind of expectation, a strong expectation.

**Mother:** The first time that I encountered death was when I had my internship in the association hospital. I was scared that time. Even though this was a Chinese medical hospital, it also practiced Western medicine. When we took internship in the ward, we would be in contact with dying people. As soon as I entered the room, he glanced at me. I felt his eyes full of hopelessness and horror. I was so frightened. After several times of witnessing death, I gradually become a little numb. When I saw some young life gone, I felt very sorry. It is not my fault, but I still feel guilty and sad in my heart. It seems that I, as a doctor, am helpless. So I say, doctors can cure diseases, but cannot control lives. If a patient is destined to die, we have no way. To be plainspoken, every dying person desires to live.

**Me:** No one wants to die.

**Mother:** No one wants to die. It is true. Every one I saw in the wards wants to live. They are so hopeless. Your grandma was also hopeless when she knew her disease could not be cured. Hopeless. That kind of look. Those patients are also like that, but we do not have ways. We are also helpless. We can only try all our best.

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